# **DR-2 Disclosure Summary Page**

Iowa Association	of Nurse Anesthetists	PAC		Sta	ntus:	Audited
Committee Type:	Iowa PAC			Sta	tutory Due Date	7/19/2012
County:	_NA			Adj	justed Due Date	
District:	0			File	ed Date	7/17/2012 12:13:38 AM
Committee Code:	6478			Pos	stmark Date	
Political Party:	Not Available			Am	endment Date	
Report Date:	2012		Candidate Name:			

#### **Treasurer**

Last Name: Anderson	First Name:	Tara	MI:	
Address: 4312 Pintail Dr				
City: Marion	State: IA	Zip Code:	52302	<b>Phone:</b> 515-681-9532
E-Mail: jtandtara@gmail.com				

# Chairperson

Last Name: Zeithamel	First Name:	Brad	Brad		
Address: 1654 Ridge Rd					
City: Iowa City	State: IA	Zip Code:	52245	<b>Phone:</b> 319-5	594-4066
E-Mail: bzeithamel@gmail.com				•	

## **Statement of Cash On Hand**

Cash on Hand at Start of Period	\$11,455.83
Schedule A: Cash Contributions Total	\$0.00
Schedule F1: Loans Received Total	\$0.00
Schedule H2: Campaign Property Sales	\$0.00
Sub-Total	\$11,455.83
Schedule B: Expenditure Total	\$267.12
Schedule F2: Cash Loan Repayments	\$0.00
Cash on Hand at End of Period	\$11,188.71

## **Additional Assets and Liabilities**

Loans in Place at Start of Period	\$0.00
Schedule D: Unpaid Bills	\$0.00
Schedule E: In-Kind Contributions	\$0.00
Schedule F2: Forgiven Loans	\$0.00
Schedule F2: Outstanding Loans	\$0.00
Schedule G: Consultant Breakdown	No
Schedule H1: Campaign Property Value	\$0.00